

### ABSTRACT OF THE DISCLOSURE

Breast cancer is treated by (a) administering to a patient in a first plurality of chemotherapy cycles a therapeutically-effective and well-tolerated amount of doxorubicin in a dose-dense protocol; (b) subsequently administering to the patient in a second plurality of chemotherapy cycles a therapeutically-effective and well-tolerated amount of a taxane chemotherapy agent, for example paclitaxel, in a dose-dense protocol; and (c) subsequently administering to the patient in a third plurality of chemotherapy cycles a therapeutically-effective and well-tolerated amount of cyclophosphamide in a dose-dense protocol. Preferably, the dose dense interval between treatments is about 14 days. The number of cycles in each plurality of chemotherapy cycles is suitably 3 or more, preferably 4. Suitable well-tolerated treatment levels are 60 mg/m<sup>2</sup> of doxorubicin, 175 mg/m<sup>2</sup> of paclitaxel, and 600 mg/m<sup>2</sup> of cyclophosphamide. A therapeutically effective amount of G-CSF may also be administered during the intervals between treatments in one or more of the chemotherapy cycles.